



# TRANSMITTAL FORM

Electronic Version 1.0.3

Stylesheet Version: 1.0

Attorney Docket  
Number:

02-  
1033

Submission Type: Utility Patent  
Filing

## Storage Shelf for Goods or Packaged Goods like Loaded Pallets

First Named Inventor: Leen-Pieter de Jong

### SUBMITTED BY

Name:	Gudrun E. Hockett
Registration Number:	35747
Electronic Signature Mark: Gudrun E. Hockett	Date Signed: 20020920

*I certify that the use of this system is for OFFICIAL correspondence between patent applicants or their representatives and the USPTO. Fraudulent or other use besides the filing of official correspondence by authorized parties is strictly prohibited, and subject to a fine and/or imprisonment under applicable law.*

*I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.*

### Attached Files:

declaration	Decl.1.TIF
declaration	Decl.2.TIF
declaration	Decl.3.TIF
·bibd-transmittal	021033apds.xml

patent-assignments

021033asgn.xml

specification

Specification.xml

fee-transmittal

021033fee.xml

Attached Image File(s):

Decl.1.TIF

Decl.2.TIF

Decl.3.TIF

Comments:

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**DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)****As a below named inventor, I hereby declare that:**

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought of the invention entitled:

**Storage Shelf for Goods or Packaged Goods like Loaded Pallets**

the specification of which

☒ is attached hereto; or  
☐ was filed on  
as US Application Ser. No.  
or PCT Application No.  
and was amended on \_\_\_\_\_

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under Title 35 U.S.C. 119 (a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(b) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed:

Prior Foreign Application Ser. No.	Country	Foreign Filing Date (Month/Day/Year)	Priority Claimed	
			Yes	No
102 34 360.8	Germany	7/27/2002	X	

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I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below:

Application No.	Filing Date (Month/Day/Year)

I hereby claim the benefit under Title 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

U.S. Parent Application or PCT Parent No.	Parent Filing Date (Month/Day/Year)	Parent Patent No.

As a named inventor, I hereby appoint the following registered practitioner to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

GUDRUN E. HUCKETT, REGISTRATION NO. 35,747

Direct all correspondence and communications to the correspondence address and telephone and fax numbers below:

GUDRUN E. HUCKETT, PATENT AGENT



30008

PATENT TRADEMARK OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these

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statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**Full name of sole or first inventor:** Leen-Pieter de Jong

Inventor's signature:  Date: 2-9-02

Residence: Lichtenvoordseweg 8, 7051 GN Varsseveld, Netherlands

Citizenship: Netherlands

Post Office Address: same as above

**Full name of second inventor, if any:**

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

**Full name of third inventor, if any:**

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

**Full name of fourth inventor, if any:**

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

**Full name of fifth inventor, if any:**

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

\_\_\_\_ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s)

# FEE TRANSMITTAL

Electronic Version 1.1.0

Stylesheet Version: 1.0

*Patent fees are subject to annual revisions on or about October 1st of each year.*

Small Entity

Small Business Concern

**TOTAL FEES AUTHORIZED: \$ 410**

The commissioner is hereby authorized to charge indicated processing and/or publication fees and credit any overpayments to:

Deposit Account Number: 501199



Deposit Account Name: Gudrun E. Hockett

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.

Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h).

## SUBMITTED BY

Authorized Name: Gudrun E. Hockett

Electronic Signature Mark: Gudrun E. Hockett

Date Signed: 20020920

## BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	201	\$ 370

Subtotal For Basic Filing Fee: \$ 370

## EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 10	203	\$ 9	0	\$ 0
Independent Claims: 1	202	\$ 42	0	\$ 0

Subtotal For Extra Claims Fees: \$ 0

## ADDITIONAL FEES

Fee Description	Number	Quantity	Fee Code	Amount	Fee Paid
Recording Each Patent Assignment Per Property Fee	00000000	1	581	\$ 40	\$ 40

Subtotal For Additional Fees: \$ 40